



January 20, 2006

SENATE BILL No. 161

DIGEST OF SB 161 (Updated January 18, 2006 2:22 pm - DI 104)

Citations Affected: IC 16-29; noncode.

Synopsis: Moratorium on comprehensive care beds. Imposes a moratorium on the construction or addition of comprehensive care beds through June 30, 2007, with certain exceptions. (The introduced version of this bill was prepared by the health finance commission.)

Effective: July 1, 2006.

Miller

January 9, 2006, read first time and referred to Committee on Health and Provider Services.
January 19, 2006, amended, reported favorably — Do Pass.

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SB 161—LS 6048/DI 104+



January 20, 2006

Second Regular Session 114th General Assembly (2006)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2005 Regular Session of the General Assembly.

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SENATE BILL No. 161

A BILL FOR AN ACT to amend the Indiana Code concerning health.

Be it enacted by the General Assembly of the State of Indiana:

- 1 SECTION 1. IC 16-29-3-1 IS AMENDED TO READ AS
2 FOLLOWS [EFFECTIVE JULY 1, 2006]: Sec. 1. ~~Notwithstanding~~
3 ~~IC 16-29-1~~, A hospital licensed under IC 16-21-2 may convert:
4 (1) ~~beginning January 1, 1986~~, not more than thirty (30) acute
5 care beds to skilled care comprehensive long term care beds; and
6 (2) ~~beginning June 1, 1989~~, not more than an additional twenty
7 (20) acute care beds to either intermediate care comprehensive
8 long term care beds or skilled care comprehensive long term care
9 beds;
10 that are to be certified for participation in a state or federal
11 reimbursement program, including ~~programs~~ **a program** under Title
12 XVIII ~~or Title XIX~~ of the Social Security Act (42 U.S.C. 1395 et seq.)
13 ~~or 42 U.S.C. 1396 et seq.~~; **the state Medicaid program**, if those beds
14 will function essentially as beds licensed under IC 16-28.
15 SECTION 2. [EFFECTIVE JULY 1, 2006] **(a) As used in this**
16 **SECTION, "comprehensive care bed" means a bed that:**
17 **(1) is licensed or is to be licensed under IC 16-28-2;**

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(2) functions as a bed licensed under IC 16-28-2; or

(3) is subject to IC 16-28.

The term does not include a comprehensive care bed that will be used solely to provide specialized services and that is subject to IC 16-29.

(b) This SECTION does not apply to the following:

(1) A hospital licensed under IC 16-21-2 that in accordance with IC 16-29-3-1, as amended by this act, converts not more than:

(A) thirty (30) acute care beds to skilled care comprehensive long term care beds; and

(B) an additional twenty (20) acute care beds to either intermediate care comprehensive long term care beds or skilled care comprehensive long term care beds;

that are to be certified for participation in the state Medicaid program if those beds will function essentially as beds licensed under IC 16-28.

(2) A health facility licensed under IC 16-28 that is under development on June 30, 2006, to add, construct, or convert comprehensive care beds. In determining whether a health facility is under development on June 30, 2006, the state department shall consider:

(A) whether:

(i) architectural plans have been completed;

(ii) funding has been received;

(iii) zoning requirements have been met; and

(iv) construction plans for the project have been approved by the state department and the division of fire and building safety; and

(B) any other evidence that the state department determines is an indication that the health facility is under development.

(c) Comprehensive care beds may not be added or constructed in Indiana.

(d) Residential beds licensed under IC 16-28-2 and unlicensed beds may not be converted to comprehensive care beds.

(e) The Indiana health facilities council may not recommend and the state department of health may not approve the certification of new or converted comprehensive care beds for participation in a state reimbursement program, including the state Medicaid program.

(f) This SECTION expires June 30, 2007.

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COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred Senate Bill No. 161, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Page 2, delete lines 7 through 8.

Page 2, line 9, delete "(2)" and insert "(1)".

Page 2, line 20, delete "(3)" and insert "(2)".

Page 3, line 2, delete "June 30, 2008." and insert "**June 30, 2007.**".

and when so amended that said bill do pass.

(Reference is to SB 161 as introduced.)

MILLER, Chairperson

Committee Vote: Yeas 7, Nays 1.

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